

**LLC-12** 

21-C93398

# **FILED**

In the office of the Secretary of State of the State of California

JUN 09, 2021

 $\label{local_local_local_local} \textbf{IMPORTANT} \ -- \ \text{Read instructions before completing this form.}$ 

Filing Fee - \$20.00

City/State/Zip:

Copy Fees - First page \$1.00; each attach			,			
Certification Fee - \$5.00 plus copy fees  This Space For Office					)nlv	
Limited Liability Company Name (Enter the e	xact name of the LLC. If you re	egistered in California using	-		Jilly	
MAFFICK LLC	•		,	,		
2. 12-Digit Secretary of State File Number	3. State,	Foreign Country or Pla	ace of Organization (only if for	ormed ou	tside of	California)
201921310101	DELAV	VARE				
4. Business Addresses						
a. Street Address of Principal Office - Do not list a P.O. Box		City (no abbreviations)	· · · · · · · · · · · · · · · · · · ·			ode
2917 W TEMPLE ST, Suite 102  b. Mailing Address of LLC, if different than item 4a		LOS ANGELES  City (no abbreviations)		CA	9002	
2917 W TEMPLE ST, Suite 102		LOS ANGELES		State CA	2ip Co 9002	
c. Street Address of California Office, if Item 4a is not in Cal 2917 W TEMPLE ST, Suite 102	ifornia - Do not list a P.O. Box	City (no abbreviations) LOS ANGELES		State CA	Zip Co	
5. Manager(s) or Member(s)  If no managers must be listed. If an entity, complete an entity, complete the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be listed. If an entity is the managers must be managers must be managers.	the manager/member is an intellitems 5b and 5c (leave Item	idividual, complete Items 5 n 5a blank). Note: The LL	address of each <b>member</b> . At least and 5c (leave Item 5b blank). C cannot serve as its own mana form LLC-12A (see instructions).	ast one na If the ma	ame <u>and</u> anager/n	d address nember is
a. First Name, if an individual - Do not complete Item 5b Anissa		Middle Name	Last Name Naouai			Suffix
b. Entity Name - Do not complete Item 5a						
c. Address City (no abbreviations)				State	Zip Co	
2917 W TEMPLE ST, Suite 102 LOS ANGELES CA				LCA	9002	26
6. Service of Process (Must provide either Individu	. ,	ad California atropt address				
INDIVIDUAL – Complete Items 6a and 6b only. Me a. California Agent's First Name (if agent is <b>not</b> a corporation		Middle Name	Last Name			Suffix
an outmontal rigoritor monitorino (in agont o not a corporation	,,	inagio riamo				J Gama
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not ent</b>	er a P.O. Box	City (no abbreviations)		State CA	Zip Co	ode
CORPORATION - Complete Item 6c only. Only in	clude the name of the registere	ed agent Corporation.				
c. California Registered Corporate Agent's Name (if agent is	. ,	ltem 6a or 6b				
VCORP SERVICES CA, INC. (C3	3156773)					
7. Type of Business	Lilly O					
a. Describe the type of business or services of the Limited Li Social Media Publisher	ability Company					
8. Chief Executive Officer, if elected or appoint	nted	T				1
a. First Name		Middle Name	Last Name			Suffix
b. Address		City (no abbreviations)		State	Zip Co	ode
9. The Information contained herein, includin	g any attachments, is true	e and correct.			<u>.l</u>	
06/09/2021 Anissa Naouai		Author	rized Person			
Date Type or Print Name of Pe	son Completing the Form	Title	Signatur	е		
<b>Return Address (Optional)</b> (For communication from person or company and the mailing address. This information of the company and the mailing address.				ument en	ter the n	name of a
Name:		1				
Company:						
Address:						



**LLC-12** 

19-E51673

# **FILED**

In the office of the Secretary of State of the State of California

DEC 04, 2019

Filing Fee - \$20.00

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1. Limited Liability Company Name (Enter the exact name of the LLC. If you registered in California using an alternate name, see instructions.)

MAFFICK LLC

2. 12-Digit Secretary of State File Number
 201921310101
 3. State, Foreign Country or Place of Organization (only if formed outside of California)
 DELAWARE

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
1013 Centre Road, Suite 403-B	Wilmington	DE	19805
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
7083 Hollywood Blvd	Los Angeles	CA	90028
c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O	, , ,	State	Zip Code
7083 Hollywood Blvd	Los Angeles	CA	90028

5. Manager(s) or Member(s)

If no managers have been appointed or elected, provide the name and address of each member. At least one name <u>and</u> address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A (see instructions).

a. First Name, if an individual - Do not complete Item 5b Anissa	Middle Name	Last Name Naouai		Suffix
b. Entity Name - Do not complete Item 5a				·
c. Address 7083 Hollywood Blvd	City (no abbreviations) Los Angeles		State CA	Zip Code 90028

6. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL - Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is <b>not</b> a corporation) Anissa	Middle Name	Last Name Naouai			Suffix
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b> 7083 Hollywood Blvd	City (no abbreviations) Los Angeles		State CA	Zip Co 900	

**CORPORATION** – Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 6a or 6b

#### 7. Type of Business

a. Describe the type of business or services of the Limited Liability Company Media production

8. Chief Executive Officer, if elected or appointed

a. First Name Anissa	Middle Name	Last Name Naouai			Suffix
b. Address 7083 Hollywood Blvd	City (no abbreviations) Los Angeles		State CA	Zip Co 9002	

 $9. \ \ The \ Information \ contained \ herein, including \ any \ attachments, is \ true \ and \ correct.$ 

	12/04/2019	Amanda Jane Getty	Maffick	
	Date	Type or Print Name of Person Completing the Form	Title	Signature
₹(	eturn Address (Option	nal) (For communication from the Secretary of State related to this docume	ent, or if purchasing a copy of the	filed document enter the name of a
)e	rson or company and the n	nailing address. This information will become public when filed. SEE INSTR	UCTIONS BEFORE COMPLETIN	IG.)

Name:

Company: Address:

City/State/Zip:

2017 California Secretary of State www.sos.ca.gov/business/be

State of Delaware Secretary of State Division of Corporations Delivered 06:58 PM 07/29/2019 FILED 06:58 PM 07/29/2019 SR 20196215440 - File Number 7537116

#### CERTIFICATE OF FORMATION

#### OF

#### MAFFICK LLC

**FIRST:** The name of the limited liability company is Maffick LLC.

**SECOND:** The address of its registered office in the State of Delaware is 1013 Centre

Road, Suite 403-B, in the City of Wilmington, Delaware 19805, in the County of New Castle. The name of its registered agent at such address is

Vcorp Services, LLC.

**THIRD:** Members may be admitted in accordance with the terms of the Operating

Agreement of the limited liability company.

**IN WITNESS WHEREOF**, the undersigned has executed this Certificate of Formation, on July 29, 2019.

/s/ Anissa Naouai

Anissa Naouai, Authorized Person

4846-9011-2414, v. 1

# State of California Secretary of State

# CERTIFICATE OF REGISTRATION

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

That on the 31st day of July, 2019, MAFFICK LLC, complied with the requirements of California law in effect on that date for the purpose of registering to transact intrastate business in the State of California; and further purports to be a limited liability company organized and existing under the laws of Delaware as MAFFICK LLC and that as of said date said limited liability company became and now is duly registered and authorized to transact intrastate business in the State of California, subject, however, to any licensing requirements otherwise imposed by the laws of this State.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of August 1, 2019.



ALEX PADILLA Secretary of State



# Secretary of State

LLC-5

# 201921310101



# Application to Register a Foreign Limited **Liability Company (LLC)**

IMPORTANT — Read Instructions before completing this form.

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed. See Instructions.

Copy Fees - First page \$1.00; each attachment page \$0.50;

Certification Fee - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to https://www.ftb.ca.gov.

FILED

Secretary of State State of California

JUL 3 1 2019

This Space For Office Use Only

1a.	LLC Name	(Enter the exact name of the LLC as listed on your attached Certificate of Good Stand	ding.)
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1b. California Alternate Name, If Required (See Instructions – Only enter an alternate name if the LLC name in 1a not available in California.)

2. LLC History (See Instructions – Ensure that the formation date and jurisdiction match the attached Certificate of Good Standing.)

a. Date LLC was formed in home jurisdiction (MM/DD/YYYY)

b. Jurisdiction (State, foreign country or place where this LLC is formed.)

29 2019

Delaware

c. Authority Statement (Do not alter Authority Statement)

This LLC currently has powers and privileges to conduct business in the state, foreign country or place entered in Item 2b.

3. Business Addresses (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

City (no abbreviations)  LOS Angeles  City (no abbreviations)	State CA State	Zip Code 90028 Zip Code
City (no abbreviations)	State	Zip Code
	CA	
City (no abbreviations)	State	Zip Code
C	ity (no abbreviations)	

4. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)		State	Zip Coo	le

CORPORATION - Complete Item 4c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 4a or 4b

Vcorp Services CA, Inc.

5. Read and Sign Below (See Instructions. Title not required.)

I am authorized to sign on behalf of the foreign LLC.

Signature

Melissa Zanoletti

Type or Print Name

LLC-5 (REV 06/2019)

2019 California Secretary of State bizfile.sos.ca.gov

# Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MAFFICK LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE THIRTY-FIRST DAY OF JULY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MAFFICK LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF JULY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

I note by outply that if it inwaguing transcript of is a full, true and corners copy of the original record in the custody of the California Successing of Sizile's nitro.

7537116 8300 SR# 20196259489

--- You may verify this certificate online at corp.delaware.gov/authver.shtml

QO, COUL

Jeffrey W. Buillock, Secretary of State

Authentication: 203323828

Date: 07-31-19

201921310101

Received by NSD/FARA Registration Unit 12/20/2021 8:33:10 PM

I hereby certify that the foregoing transcript of page(s) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office,

AUG - 1 2019

Olys Coll ALEX PADILLA, Secretary of State

Date:





Business Entities, 1500 11th St., 3rd Floor, Sacramento, CA 95814

## Thank You for Doing Business in California

Congratulations on the registration of your limited liability company with the California Secretary of State (SOS). Please see below for important information.

#### What's next? Required Filings

<u>SOS Statement of Information</u> – Limited liability companies must fill out and file a complete Statement of Information (Form LLC-12) within the <u>first 90 days</u> of registering with the SOS, and every 2 years thereafter before the end of the calendar month of the original registration date.

How can you file your Statement of Information?

- Currently, Statements of Information can be submitted on paper to the SOS through the mail, or submitted in person (drop off) to the Sacramento office. Additional information regarding Statements of Information, including forms, instructions and fees is available at www.sos.ca.gov/business/be/statements.
- Current processing times for Statements of Information may be found at www.sos.ca.gov/business//be/processing-times.
- Limited liability companies may file their Statement of Information using our secure E-File Statement of Information filing service at <a href="https://licbizfile.sos.ca.gov">https://licbizfile.sos.ca.gov</a>.

<u>Franchise Tax Board (FTB) Tax Filing</u> – Once your limited liability company is registered with the SOS, you are required to file a tax return with FTB for each taxable year even if you are not conducting business or have no income. Contact FTB at www.ftb.ca.gov or (800) 852-5711 for forms and requirements concerning franchise taxes or income taxes.

Be aware, if you fail to file a return by the original or extended due date, or fail to pay taxes when due, a penalty may be imposed by FTB. Please visit www.ftb.ca.gov/businesses/Penalty-Information.shtml for tax penalty related information.

#### Other Business Information and Resources

All business entities are subject to state and federal tax laws. You may wish to contact the following agencies to assist you with these issues:

- Internal Revenue Service www.irs.gov or call (800) 829-1040 for forms and issues concerning Federal tax, employer identification numbers, subchapter S elections.
- State Board of Equalization www.boe.ca.gov or call (800) 400-7115 for forms and issues
  concerning sales taxes or use taxes.
- Employment Development Department www.edd.ca.gov or call (800) 300-5616 for forms and issues concerning employment and payroll taxes.
- CalGold www.calgold.ca.gov for appropriate permit, licensing, and contact information for the various agencies that administer and issue these permits.
- SOS Business Resources www.sos.ca.gov/business/be/resources for a list of agencies you may need to contact to ensure proper compliance with California state law.
- CA Governor's Office of Business and Economic Development (Go-Biz) www.business.ca.gov for a range of business services including, site selection and permit assistance.
- The California Business Incentives Gateway (CBIG) https://cbig.ca.gov is a web portal that connects business owners and entrepreneurs with financial incentives.

LLC Welcome-Letter (Rev. 09/2018)

# LIMITED LIABILITY COMPANY AGREEMENT OF MAFFICK LLC

THIS LIMITED LIABILITY COMPANY AGREEMENT OF MAFFICK LLC (this "Agreement") is made and entered into as of July 30, 2019, by Anissa Naouai, a resident of Highland Park, California, as the sole member (the "Member"), with reference to the following facts:

- A. MAFFICK LLC, a Delaware limited liability company (the "Company"), was duly formed under the Delaware Limited Liability Company Act (currently Chapter 18 of Title 6 of the Delaware Code) (the "Act") on July 29, 2019 by the filing of a Certificate of Formation ("Certificate of Formation").
- B. The Member wishes to establish the terms of this Agreement as the governing document of the Company.

NOW, THEREFORE, the Member agrees as follows:

- 1. <u>Name</u>. The name of the Company will be "Maffick LLC." The Member may change the name of the Company at any time and may operate under a fictitious business name as the Member so decide.
- 2. <u>Purpose</u>. The purpose of the Company is to engage in any lawful business or activity for which a limited liability company may be organized under the Act; provided that the Company will not conduct any banking, insurance or trust company business.
- 3. <u>Principal Office</u>. The principal office of the Company will be at such location as the Manager (as defined below) may designate from time to time, which need not be in the State of Delaware.
- 4. <u>Management Decisions</u>. The Company will be managed by a "Manager" appointed by the Member. Anissa Naouai is hereby appointed as the initial Manager of the Company, and she will hold such office until a successor is appointed by the Member. The Manager will be responsible for the day to day management of the Company's business and will have all rights and powers generally conferred by law or necessary, advisable or consistent in connection therewith.
- 5. <u>Membership Interests</u>. The Member's interest in the Company will be represented by the rights she has under this Agreement and by units ("Units") issued by the Company to the Member. The initial class of Units is Class A Units. Each Class A Unit represents a fractional part of the interest of the holder thereof in profits, losses and distributions

of the Company. The Member is hereby issued 10,000,000 Class A Units, representing one hundred percent (100%) of the interests in the Company.

- 6. <u>Capital Contributions</u>. The Member will make capital contributions to the Company in amounts determined by the Manager.
- 7. <u>Allocations of Tax Items</u>. For so long as the Member is the sole member of the Company, the Member shall treat all items of income, gain, loss, deduction, and credit of the Company as its own for U.S. federal income tax purposes.
- 8. <u>Distributions</u>. Distributable cash (as determined by the Manager) will be distributed to the Member in accordance with her membership interest.
- 9. <u>Dissolution</u>. The Company will dissolve upon the written consent of the Member.
- 10. <u>New Members</u>. New Members will be admitted upon the consent of the Manager.
- 11. <u>Agent For Service of Process</u>. The registered office of the Company in the State of Delaware will be the initial registered office designated in the Certificate of Formation or such other office (which need not be a place of business of the Company) as the Manager may designate from time to time in the manner provided by law. The registered agent of the Company in the State of Delaware will be the initial registered agent designated in the Certificate of Formation, or such other person or persons as the Manager may designate from time to time in the manner provided by law.

#### 12. Miscellaneous.

- a. <u>Applicable Law</u>. This Agreement will, in all respects, be governed by the laws of the State of Delaware.
- b. <u>Severability</u>. Nothing contained herein will be construed so as to require the commission of any act contrary to law, and wherever there is any conflict between any provisions contained herein and any present or future statute, law, ordinance or regulation, the latter will prevail; but the provision of this Agreement which is affected will be curtailed and limited only to the extent necessary to bring it within the requirements of the law.
- c. <u>Further Assurances</u>. The Member hereto will execute and deliver any and all additional papers, documents and other assurances, and will do any and all acts and things reasonably necessary in connection with the performance of his/her/their obligations hereunder to carry out the intent of the parties hereto.

- d. <u>Modifications or Amendments</u>. No amendment, change or modification of this Agreement will be valid, unless in writing and signed by the Member(s).
- e. <u>Entire Agreement</u>. This Agreement contains the sole and entire agreement and understanding of the Member with respect to the entire subject matter hereof, and any and all prior discussions, negotiations, commitments or understandings related hereto, if any, are hereby merged herein. No representations, oral or otherwise, express or implied, other than those specifically referred to in this Agreement or any exhibits contemplated thereby, have been made by the Member. No other agreements not specifically contained herein, oral or otherwise, will be deemed to exist or to bind any of the parties hereto.
- f. <u>Number and Gender</u>. In this Agreement, the masculine, feminine or neuter gender, and the singular or plural number, will each be deemed to include the others whenever the context so requires.
- g. <u>Captions</u>. The captions appearing at the commencement of the sections hereof are descriptive only and for convenience in reference. Should there be any conflict between any such caption and the section at the head of which it appears, the section and not such caption will control and govern in the construction of this Agreement.

IN WITNESS WHEREOF, the Member has executed this Agreement as of the date and at the place first above written.

**SOLE MEMBER:** 

Docusigned by:

Aussa Masuai

Name: Anissa Naouai

# Received by NSD/FARA Registration Unit 12/20/2021 8:33:14 PM

## **EXECUTION**

In accordance with 28 U.S.C. § 1746, and subject to the penalties of 18 U.S.C. § 1001 and 22 U.S.C. § 618, the undersigned swears or affirms under penalty of perjury that he/she has read the information set forth in this statement filed pursuant to the Foreign Agents Registration Act of 1938, as amended, 22 U.S.C. § 611 et seq., that he/she is familiar with the contents thereof, and that such contents are in their entirety true and accurate to the best of his/her knowledge and belief.

Date  A a a a l	Printed Name Anissu Naouai	Signature